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CONFIRMATION NO. 1816

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<b>SERIAL NUMBER</b> 10/786,556	<b>FILING OR 371(c) DATE</b> 02/25/2004 <b>RULE</b>	<b>CLASS</b> 514	<b>GROUP ART UNIT</b> 1625	<b>ATTORNEY DOCKET NO.</b> bulk 3.0-038
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**\*\* CONTINUING DATA \*\*\*\*\*****\*\* FOREIGN APPLICATIONS \*\*\*\*\***

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**IF REQUIRED, FOREIGN FILING LICENSE GRANTED****\*\* 05/19/2004**

Foreign Priority claimed <input type="checkbox"/> yes <input type="checkbox"/> no	<b>STATE OR COUNTRY</b> INDIA	<b>SHEETS DRAWING</b> 2	<b>TOTAL CLAIMS</b> 25	<b>INDEPENDENT CLAIMS</b> 3
35 USC 119 (a-d) conditions met <input type="checkbox"/> yes <input type="checkbox"/> no <input type="checkbox"/> Met after Allowance				
Verified and Acknowledged	Examiner's Signature	Initials		

**ADDRESS**

45776

**TITLE**

Crystalline form Z of rabeprazole sodium and process for preparation thereof

<b>FILING FEE RECEIVED</b> 990	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following:	<input type="checkbox"/> All Fees
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